

CITY OF FAIRFAX BUILDING PERMIT APPLICATION

DEPARTMENT OF FIRE AND RESCUE SERVICES
OFFICE OF CODE ADMINISTRATION
10455 ARMSTRONG ST., ROOM 103
FAIRFAX, VA 22030
(703) 385-7830
FAX (703) 385-9265

PERMIT NO. _____
DATE _____
PERMIT FEE _____
INVOICE NO. _____
CARD MADE _____

I. JOB LOCATION

ADDRESS _____ SUITE # _____
TENANT'S NAME _____

II. NAME OF OWNER

ADDRESS _____
ZIP CODE _____ TELEPHONE NO. _____

III. NAME OF CONTRACTOR

ADDRESS _____
ZIP CODE _____ TELEPHONE NO. _____ FAX NO. _____

CITY OF FAIRFAX BUSINESS LICENSE NO. _____
STATE OF VA. CONTRACTOR'S LICENSE (A B C) _____ EXPIRATION DATE _____
CITY OF FAIRFAX BUILDING HOME IMPROVEMENT LICENSE NO. _____

TYPE OF IMPROVEMENT <input type="checkbox"/> New Structure <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Moving <input type="checkbox"/> Foundation Only <input type="checkbox"/> Other	PROPOSED USE Residential <input type="checkbox"/> One Family <input type="checkbox"/> Multi-Family Number of Dwelling Units _____ <input type="checkbox"/> Hotel, Motel Non-Residential: Specify Use _____
COST (ESTIMATE) Building \$ _____ Electrical \$ _____ Plumbing \$ _____ Mechanical \$ _____ Other \$ _____ Total Cost \$ _____	Use Group of Building _____ Construction Type _____
MECHANIC'S LIEN AGENT Name _____ Address _____ Telephone No. _____ None designated	ASBESTOS INFORMATION Asbestos Abatement Report Received _____

TOTAL FLOOR AREA OF CONSTRUCTION: _____

DESCRIPTION OF WORK TO BE PERFORMED: _____

I hereby certify that I have authority of the owner to make this application, that the information is complete, and that is a permit if issued the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations including private building restrictions, if any, which relate to the property. He/She and the company or organization named and represented herein is duly registered or exempt from registration in accord with the provisions of Chapter 7 of the Code of Virginia.

Signature of Owner or Agent _____ **Date** _____